

Docket No.: 8734.230 US

(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

GEUM, Chang-Seok

Customer No.: 30827

Application No.: 10/660,655

Confirmation No.: 1984

Filed: September 12, 2003

Art Unit: 1762

For: DISPENSER FOR CUTTING LIQUID

CRYSTAL DISPLAY PANEL AND METHOD

FOR CONTROLLING GAP BETWEEN SUBSTRATE AND NOZZLE USING THE

SAME

Examiner: CLEVELAND, Michael

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

RENEWED PETITION UNDER 37 C.F.R. §1.137(b)

Sir:

In response to the Decision on the Petition filed September 28, 2006 that was dismissed, Applicants request reconsideration of the petition filed September 28, 2006. The response filed with the Petition filed September 28, 2006 was considered to not be sufficient to place the application in condition for allowance. Hence, in response to this dismissal, Applicant's herewith submit a Request for Continued Examination, along with an Amendment with RCE. Applicant's respectfully request reconsideration of their September 28, 2006 petition, and reiterate that the failure to respond to the Final Office Action mailed March 7, 2005 was unintentional.

27/2007 MAHMED1 00000178-106606

L1/09/2007 CKHLOK

Application No.: 10/660,655 Docket No.: 8734.230 US

If these papers are not considered timely filed by the Patent and Trademark Office, then a petition is hereby made under 37 C.F.R. §1.136, and any additional fees required under 37 C.F.R. §1.136 for any necessary extension of time, or any other fees required to complete the filing of this response, may be charged to Deposit Account No. 50-0911. Please credit any overpayment to deposit Account No. 50-0911. A duplicate copy of this sheet is enclosed.

Dated: 26 July 2007

Respectfully submitted,

Eric J. Nuss

Registration No.: 40,106

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Attorneys for Applicant

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND						
1 Date of Request: 11/08/07 2 Serial/Patent # 10/660,655					10/660,655	
3 Please refund the following fee(s):		4 PAP NUM	ER BER	5 DATE FILED	6 AMOUNT	
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